

HUSBAND*Max E JONES (DPM)*

Born _____ Place _____
 Chr. _____ Place _____
 Marr. _____ Place _____
 Died _____ Place _____
 Bur. _____ Place _____

HUSBAND'S FATHER

HUSBAND'S OTHER WIVES

WIFE

Born _____ Place _____
 Chr. _____ Place _____
 Died _____ Place _____
 Bur. _____ Place _____

WIFE'S FATHER

WIFE'S OTHER HUSBANDS

CHILDREN
List each child (whether living or dead) in order of birth
 Given Names SURNAMES

WHEN BORN

DAY MONTH YEAR

WHERE BORN

TOWN COUNTY STATE OR COUNTRY

Husband**Wife**Ward 1.
Examiners: 2.

Stake or Mission

Max E JONES (DPM)

NAME & ADDRESS OF PERSON SUBMITTING SHEET

SOURCES OF INFORMATION

OTHER MARRIAGES

NECESSARY EXPLANATIONS

RELATION OF ABOVE TO HUSBAND RELATION OF ABOVE TO WIFE

FOUR GENERATION SHEETS FOR FILING ONLY

YES NO

DATE SUBMITTED TO GENEALOGICAL SOCIETY

LDS ORDINANCE DATABAPTIZED (Date) ENDOWED (Date) SEALED (Date and Temple)
WIFE TO HUSBAND

HUSBAND

/ / / / /

SEALED (Date and Temple)
CHILDREN TO PARENTS

SEX M F	CHILDREN <small>List each child (whether living or dead) in order of birth</small> Given Names SURNAMES	WHEN BORN			WHERE BORN			DATE OF FIRST MARRIAGE TO WHOM	WHEN DIED MONTH YEAR	WIFE
		DAY	MONTH	YEAR	TOWN	COUNTY	STATE OR COUNTRY			
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										

*He practiced in Heber from**to 24 Mar 1975*